## **Teeth in occlusion:**

Incisor classification Cla	ss I Cla	ass II /div 1	Class II /div 2	Class III					
Overjet (mm)		Overbite (r							
Molar classification	Right Left	Class I	Class II	Class III					
Canine classification	Right Left	Class I	Class II	Class III					
Upper arch crowding mm	Lowe	er arch crowding	mm						
Centrelines Aligned De	escription:								
<b>Crossbites</b> Ye	es	No .							
Details									
<b>Displacements</b> Ye	es	No .							
Details									
Radiographs OPG Periapical									
Details									
Summary									
Problem list  1  2  3  4  Compromise Treatment Plan  Treatment plan (including non-orthodontic)	Discussed	Aims and objectives  1  2  3  4  Yes No							
Annliances	Q100 Aligner	s Removable	Q Fixed Ap	inliances					



## **Orthodontic Patient Assessment**

Date of assessment:

Patient's Name:					Dentist	's Name:						
Patient's Compla	int:		Previous	Orthodonti	cs		Habits					
Extra oral examination												
Skeletal Assess	ment		A-P: FMPA:	Clas Decreas	s I		Class II			Class III		
Lower Face Height				Decrea	sed	А	verage		Ir	ncreased		
Facial Asymmetr	У			,	Yes		No					
Description												
TMJ												
Soft Tissues  Lip competence Yes No Lip Line High Average Low												
Description												
Intra oral examination  Teeth Present												
8 7	6 5	4	3 2	1	1	2	3 4	5	6	7	8	
8 7	6 5	<b>4</b>	3 2	1	1	2	3 4	5	6	7	8	
Caries			Yes	No								
Details												
Oral Hygiene				Poor		Aver	age		Go	od		
Periodontal condition	ВРЕ			Poor		Avei	age		God	od		